Approved for use through 9/30/00.OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DI	ECLARAT	TION FO	R UTILITY OR	Attorney Docket Number	24631.710			
		DESIG	= =	First Named Inventor	Rajeev Chawla			
	PATEN	IT APPL	LICATION	COMPLETE IF KNOWN				
	(3	7 CFR	1.63)	Application Number	Not Yet Assigned			
	Declaration Submitted with Initial Filing		Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e))	Filing Date	Herewith			
		OR		Group Art Unit	Not Yet Assigned			
			required)	Examiner Name	Not Yet Assigned			

As a below named Inven	tor, I hereby dec	lare that:									
My residence, post office address, and citizenship are as stated below next to my name.											
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:											
метно	DD AND SY	YSTEM FOR CAC	HING SEC	CURE WE	EB CONTEN	NT					
(Title of the Invention) the specification of which ☑ is attached hereto											
OR ☐ was filed on (MM/	(DD/YYYY)		as United	States Applica	ation Number or F	PCT International					
Application Number a	nd was amende	d on (MM/DD/YYYY)	(if applicable).								
I hereby state that I have amended by any amendme	reviewed and nt specifically re	understand the contents of	of the above id	entified speci	fication, including	g the claims, as					
I acknowledge the duty to d	lisclose informati	ion which is material to pate	entability as defi	ned in 37 CFF	R 1.56.						
I hereby claim foreign prio certificate, or 365(a) of an America, listed below and I or of any PCT international	y PCT internation	onal application which des ied below, by checking the	signated at leas box, any foreig	t one country n application	other than the	United States of					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed		Certified Copy Attached? YES NO						
		are listed on a supplementa				to:					
Application Numbe	I hereby claim the benefit under 35 U.S.C. 119(h) of any United States provisional application(s) listed below.  Application Number(s) Filing Date (MM/DD/YYYY)										
60/223,171		08/07/2000	,	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.							

(Page 1 of 2)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION** — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of the application is not

designated in the prior United States or PCT international application in the manner provided by the first paragraph of 31 U.S.C. 112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.													
U.S. Pare	er		Parent Filing Date (MM/DD/YYYY)				Parent Patent Number (if applicable)						
U.S. Parent Application or PCT Parent Number (MM/DD/YYYY) (if applicable)  Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.													
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:    Customer Number   021971   Place Customer Number Bar Code Label here													
Registered practitioner(s) name/registration number listed below													
N	lame		Registration Number					Name				Number	
☐ Additional regis	tered pra	actitioner(s) name	d on supp	olemental F	Registere	d Practitione	er Info	rmation	sheet F	TO/SB/02	C attac	ched hereto.	
Direct all correspondence to: ☐ Customer Number or Bar Code Label 021971 OR ☐ Correspondence address below													
Name	Micha	el C. Martensen											
Address	Wilso	n Sonsini Goodri	n Sonsini Goodrich & Rosati										
Address	650 P	age Mill Road											
City	Palo A	Alto		State	C.	CA ZIP 94304							
Country	U.S.	Telephone 650				3-9300			Fax	650-493-	6811		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.													
Name of Sole	or Fir	st Inventor:			☐ A	petition ha	as be	en file	d for th	is unsign	ed inv	entor	
Given Name (first and middle (if any)						Family Name or Surname							
Rajeex						Chawla							
Inventor's Signature			March						Date	(	06/29/01		
	U										' '		
Residence: City		Union City	Sta	ate	CA	Countr	Country U		SA	Citizenship		USA	
Post Office Addre	5819 Carmel Way												
Post Office Addre									1				
City	Union City	State CA ZIP 94587 Country					USA						
Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto:													

Please Type a plus sign (+) inside this box	<b></b>	+	PTO/SB/02A (3-97)  Approved for use through 9/30/98,OMB 0651-0032  Patent and Trademark Office: LLS DEPARTMENT OF COMMERCE
			Patent and Trademark Office: 11S DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION**

## ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Additional	A petition has been filed for this unsigned inventor									
Given Name		Family Name or Surname								
			Tsirigotis							
Inventor's Signature	P. Ts.	, S				Date	(	129/01		
Residence: City	Sunnyvale	State	CA	١	Country	USA	Citizenship		Greece	
Post Office Address										
Post Office Address	231 Acalanes Drive #9									
City	Sunnyvale		CA	١	ZIP	94086	Country		USA	
Name of Additional	Joint Inventor,	if any:	☐ A petition has been filed for this unsigned inventor							
Given Name	(first and middle (if	any)		Family Name or Surname						
	Dan			Boneh						
Inventor's Signature	Dan E	Bonell	<u>'</u>				Date	6/	129/9	
City	Palo Alto	State	CA	<b>\</b>	Country	USA	Citizenship		Israeli	
Post Office Address	3349 Louis Road									
Post Office Address										
City	Palo Alto	State	C.A	١	ZIP	94303	Country		USA	
Name of Additional	Joint Inventor,	A petition has been filed for this unsigned inventor								
Given Name (first and middle (if any)				Family Name or Surname						
Inventor's Signature						;	Date			
City			Country			Citizenship				
Post Office Address										
Post Office Address					· · · · · · · · · · · · · · · · · · ·		T			
City				ZIP		Country				

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.